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#### Attorney Docket Number **DECLARATION FOR UTILITY OR** First Named Inventor **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION Application Number (37 CFR 1.63) on even date Filing Date ☐ Declaration Submitted after Initial X Declaration OR Group Art Unit Submitted Filing (surcharge with Initial

**Examiner Name** 

As a below named inventor, I her	As a below named inventor, I hereby declare that:						
My residence, mailing address, and	l citizenship are as state	ed below next to my nan	ne.				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  A METHOD AND A TOOL FOR ESTIMATING PROBABILITY OF DATA CONTENTION IN A MULTI-PROCESSOR SHARED-MEMORY SYSTEM							
the american of which	(Ti	itle of the Invention)					
the specification of which  is attached hereto  OR  as United States Application Number or PCT International  (if applicable).  Application Number  and was amended on (MM/DD/YYYY)  I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)		Certified Copy Attached? YES NO			
(2)			0000				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s)		te (MM/DD/YYYY)	Additions numbers supplem	al provisional application s are listed on a ental priority data sheet /02B attached hereto.			

[Page 1 of 2]

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INCIPATION OF THE PARTY.

# **DECLARATION** — Utility or Design Patent Application

Direct all corresponden	CE TO:	ner Number Code Label				OR	X Co	orrespondence ad	dress below
Name Pascal	l & Associa	tes							
Address P.O. I	30x 3440								
Address Statio	on D								
city Ottawa	ì	·····			State	ON	[ Z	ZIP K1P	6P1
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE O	R FIRST INVENT	OR:			A petit	tion has b	een file	d for this unsig	ned inventor
Given Name (first and middle [if any	n Robert M	•			Family or Sur		F	itzel	
Inventor's Registrature	5 Fital							Date NOV	29 2000
Residence: City	Kanata		Sta	ate	ON	Country	CA	Citizenship	CA
Mailing Address	170 Gras	sy Pla	nes	Dri	ve				
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Inventor's 7-7	Turey-							Date Nov-	29,2000
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city Kanata					ZIP		2N8_		anada
Additional inventors	are being named on th	e <u> </u>	emental	Addition	nal Inve	ntor(s) she	et(s) PTO/	SB/02A attached	hereto.

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Name of A	Addi
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Inventor's Signature	
Residence:	City
Mailing Add	ress

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# **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet
Page \_\_\_ of \_\_\_

	nal Joint Inventor, if an		A petition has been filed for this unsigned inventor					
Given	Name (first and middle [if any])	)		nin da da	Family Name	or Su	mame	
Jam	es R.			Gaı	11d	7		
Inventor's Signature	Iim Ganlo	<b>.</b>	-				Date Mov. 29/2000	
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Mailing Address	1001-2600 Da	raper	Avenu	ıe				
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Name of Additio	nal Joint Inventor, if an	y:		A petition	has been filed fo	or this	unsigned inventor	
Given	Name (first and middle [if any]	)			Family Name	or Su	rname	
Inventor's Signature				<del></del>			Date	
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# **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

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Application Number	
Filing Date	
First Named Inventor	Robert M. Fitzel
Group Art Unit	
Examiner Name	
Attorney Docket Number	583P09US

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4			Applicant or Assig				]
Name		Robert M.	Fitzel				1
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Application Number		•
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First Named Inventor	Robert M. Fitzel	-
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Attorney Docket Number	583P09US	_

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Name	Jame	s R. Gauld		· · · · ·				
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Group Art Unit						
Examiner Name						
Attorney Docket Number	583P09US					

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SIGNATURE of Applicant or Assignee of Record										
Name	Tadeusz J. Drwiega									
Signature	Tadeusz J. Drwiega T-Nrlse, -									
Date	Nov. 29,2000									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.										
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